

# United States District Court

DISTRICT OF CNMI

UNITED STATES OF AMERICA

## SUMMONS IN A CIVIL ACTION

v.

CASE NUMBER: CV 05 - 0014

ISAAC M. CALVO

FILED  
Clerk  
District Court

SEP 30 2005

TO: (Name and Address of Defendant)

Isaac M. Calvo  
P.O. Box 881  
Rota, MP 96951

For The Northern Mariana Islands  
By \_\_\_\_\_  
(Deputy Clerk)

YOU ARE HEREBY SUMMONED and required to file with the Clerk of this Court and serve upon

PLAINTIFF'S ATTORNEY (name and address)

MIKEL W. SCHWAB, AUSA  
U.S. Attorney's Office  
Sirena Plaza, Suite 500  
108 Hernan Cortez Avenue  
Hagatna, Guam 96910-5059

an answer to the complaint which is herewith served upon you, within Twenty (20) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

MAY 27 2005

GALO L. PEREZ  
CLERK

DATE

  
BY DEPUTY CLERK

AO 440 (Rev. 1/90) Summons in a Civil Action

## RETURN OF SERVICE

Service of the Summons and Complaint was made by me <sup>1</sup>	DATE 09/06/05
NAME OF SERVER (PRINT) Wolfgang M. Calvert	TITLE CIDUSM #3086
Check one box below to indicate appropriate method of service	

☐ Served personally upon the defendant. Place where served: \_\_\_\_\_

☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

Name of person with whom the summons and complaint were left: \_\_\_\_\_

☐ Returned unexecuted: \_\_\_\_\_

☒ Other (specify): Personally served on Ramona Calvo  
by the USPS via certified mail.

## STATEMENT OF SERVICE FEES

TRAVEL N/A	SERVICES N/A	TOTAL N/A
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## DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.


Executed on 09/06/05  
Date

Signature of Server

US Marshals Service D/NM1  
Address of Server

Po Box 500570 Saipan MP 96950

1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

PLAINTIFF	COURT CASE NUMBER
UNITED STATES OF AMERICA	CV 05-0014
DEFENDANT	TYPE OF PROCESS
ISAAC M. CALVO	Service of Complaint & Summons
<b>SERVE</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
	Isaac M. Calvo
<b>AT</b>	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
	Rota Mayor's Office Rota, MP

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	1
United States Attorney's Office Financial Litigation Unit Sirena Plaza, Suite 500 108 Hernan Cortez Avenue Hagatna, Guam 96910-5059	Number of parties to be served in this case	1
	Check for service on U.S.A.	0

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Last known mailing address of POB 881, Sinapalo, Rota, MP 96951. Possible last known phnoe number 532-2789. Possible last known employer is Mayor's Office as the Program Manager.

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
MIKEL. W. SCHWAB, Assistant U.S. Attorney		(671) 472-7332	5/24/2005

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 01	District of Origin No. 005	District to Serve No. 005	Signature of Authorized USMS Deputy or Clerk J. A. CIDUSM #3086	Date 19 Jul 05
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Ramona Calvo	
Address (complete only if different than shown above)	Date of Service 09/06/05
	Time UNK am
	Signature of U.S. Marshal or Deputy J. A. CIDUSM

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
N/A	N/A	N/A	N/A	N/A	N/A	N/A

REMARKS: 08/30/05 Registered mail # 7005 0390 0002 3292 3560 the \$ 4.65

**INSTRUCTIONS FOR SERVICE OF  
PROCESS BY THE U.S. MARSHAL**

Please type or print legibly, insuring readability of all copies. **DO NOT DETACH ANY COPIES.**

Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ.

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.)

Additional supplies of the USM-285 may be obtained from the Clerk of the U.S. District Court or U.S. Marshal, without cost.

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 ISAAC M. CALVO, ROTA MAYORS  
 OFFICE CNMI  
 PO BOX 881 SINAPALO  
 ROTA MP 96951

2. Article Number  
 (Transfer from service label)

7005 0390 0002 3292 3560

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
 Postage and Fees Paid  
 USPS  
 Permit No. 10

SEP 6  
 2005  
 AM

• Sender: Please print your name, address, and ZIP+4 in this box.

US MARSHALS SERVICE  
 DISTRICT OF NORTHERN MARIANA ISLANDS  
 POBOX 500570  
 SAIPAN MP 96950